Application or Docket Number

| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  10/64 9 365  |  |   |                  |                               |                                 |                  |        |               |                |                        |         |                     |                        |
|--|--|---|------------------|-------------------------------|---------------------------------|------------------|--------|---------------|----------------|------------------------|---------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                  |                               |                                 |                  |        | SMALI<br>TYPE | EN             |                        | OR      | OTHER<br>SMALL      |                        |
| то   | TAL CLAIMS                                     |   | 36               |                               |                                 |                  |        | RAT           | Ε              | FEE                    |         | RATE                | FEE                    |
| FO   | -, <u>'</u><br>R                               |   | NUMBER FILED     |                               | NUMBER EXTRA                    |                  |        | BASIC         | FEE            | 385.00                 | OR      | BASIC FEE           | 770.00                 |
| TO   | TAL CHARGEA                                    | BLE CLAIMS                                      | 36 minus 20=     |                               | . 16                            |                  |        | X\$ 9         | =              |                        | OR      | X\$18=              | 288                    |
| IND  | EPENDENT CL                                    | AIMS  | 3 minus 3 =      |                               | *                               |                  |        | X43           | _              |                        | OR      | X86=                |                        |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM PF                                   | RESENT           |                               |                                 |                  |        | .145          |                |                        |         | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in col  |  |   |                  |                               |                                 |                  |        | +145<br>TOTA  |                | -                      | OR      | TOTAL               | 1008                   |
|  |  |   |                  |                               |                                 |                  |        |               |                |                        | OR      | OTHER               | 1058<br>THAN           |
| (Column 1) (Column 2) (Column 3)   |  |   |                  |                               |                                 |                  |        | SMA           | LL E           | ENTITY                 | OR      | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT       |                  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                    | PRESENT<br>EXTRA |        | RAT           | E              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | 4   | Minus            | **                            | 0                               | =                | 1      | X\$ 9         | =              |                        | OR      | X\$18=              |                        |
|  | Independent                                    | ŧ   | Minus            | ***                           |                                 | =                |        | X43           | =              |                        | OR      | X86=                |                        |
| ٧  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                               |                                 |                  | ]      | +145          |                |                        | OR      | +290=               |                        |
|  |  |   |                  |                               |                                 |                  |        |               | TAL            |                        | 1       | TOTAL               |                        |
| ADDIT, FEEOH ADDIT, FEE  |  |   |                  |                               |                                 |                  |        |               |                |                        |         |                     |                        |
| NT B   | ·  | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT |                  | HIGI<br>NUN<br>PREVI          | HEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |        | RAT           | E              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| <b>AMENDMENT</b>   | Total  | *   | Minus            | **                            |                                 | =                | 1      | X\$ 9         | )=             |                        | OR      | X\$18=              | ·                      |
|  | Independent                                    | •   | Minus            | 212                           |                                 | =                |        | X43           | =              |                        | OR      | X86=                |                        |
| ⋖  | FIRST PRESENTATION OF MULTIPLE DEPENDENT       |   |                  |                               | T CLAIM                         |                  | J      | +14!          | <br>5=         |                        | OR      | 220                 |                        |
|  |  |   |                  |                               |                                 |                  |        |               | TAL            |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                      |                  |                               | ımn 2)                          | (Column 3        | )_     |               |                |                        | _       |                     |                        |
| NTC  |  | CLAIMS REMAINING AFTER AMENDMENT                |                  | NUI<br>PREV                   | HEST<br>MBER<br>IOUSLY<br>) FOR | PRESENT<br>EXTRA |        | RA1           | Έ              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | . 0   | Minus            | ** 0                          | 30                              | -A               |        | X\$ :         | <del>)</del> = |                        | ОЯ      | X\$18=              |                        |
| MEN  | Independent                                    | · 0   | Minus            | ***                           | 3.                              | 0                |        | X43           | )=             |                        | OA      | X86=                |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPEND          |   |                  |                               | IT CLAIN                        |                  | L      | +14           |                |                        | OR      | 200                 |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                  |                               |                                 |                  |        |               |                |                        |         |                     |                        |
| eer  | 'if the "Highest Nu<br>The "Highest Nur        | umber Previously Pa<br>mber Previously Pa       | id For" (Total o | r Indepen                     | dent) is th                     | e highest num    | ber fo | ound in t     | ne ap          | propriate b            | ox in c | olumn 1.            |                        |